

**UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF WASHINGTON  
AT SEATTLE**

STATE OF WASHINGTON, et al.,

Plaintiffs,

v.

DONALD J. TRUMP, in his official  
capacity as President of the United States of  
America, et al.,

Defendants.

NO.

DECLARATION OF  
ZACK BARNETT-KERN, LICSW,  
MSW

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ZACK BARNETT-KERN, LICSW, MSW

ATTORNEY GENERAL OF WASHINGTON  
Complex Litigation Division  
800 Fifth Avenue, Suite 2000  
Seattle, WA 98104  
(206) 464-7744

1 I, Zack Barnett-Kern, declare as follows:

2 1. I am over the age of 18, competent to testify as to the matters herein, and make  
3 this declaration based on my personal knowledge.

4 2. I am a transman and identify as queer; my pronouns are he/him. I live in Seattle,  
5 Washington.

6 3. I am a Licensed Independent Clinical Social Worker Associate (LICSWA)  
7 licensed by the Washington State Department of Health. I earned a Bachelor of Arts in  
8 Psychology from Western Oregon University in 2017, and a Master of Social Work from the  
9 University of Washington in 2023. I have specialized training to diagnosis for gender dysphoria.  
10 I am certified in Mental Health First Aid and Communicating Through Conflict. In my role, I  
11 use various therapeutic methods depending on the individual to provide support to adolescents  
12 (age 13 and older) and adults to achieve their mental health goals. I provide gender-affirming  
13 care, including diagnosing gender dysphoria, writing letters of support, and refer clients to  
14 specialists in gender-affirming medical care. I also provided family-based counseling in the past.

15 4. I've been a therapist on staff at an all-queer clinic since 2023. Before earning a  
16 Masters degree, I was a Court Appointed Special Advocate (CASA) for children in Polk County,  
17 Oregon from 2016-2022. In this role, I advocated for a transgender youth who was in the foster  
18 care system. Previously, CASA volunteers had refused to work with the transgender youth based  
19 on his identity.

20 5. In my current practice I have clients who are transgender youth ages 13-19. I also  
21 work with transgender adults. Based on my clinical experience I can attest that gender-affirming  
22 care is absolutely vital.

23 6. The gender-affirming care I provide is a place to listen, express feelings, and  
24 provide a space to be seen and feel supported. We talk about identity and explore what this  
25 means. We talk about what makes us who we are. I want the children I see to feel supported. It  
26 is beyond our biology it is about who we are as people. I provide care that helps them feel

1 comfortable with who they are as a person and know that it is ok to express their identity and not  
2 feel like they need to fit into a box. I provide compassion for their situation.

3 7. My work is informed by the statistics on suicide for unsupported youth. Having  
4 a supportive environment can literally be the difference between life and death. Being in a  
5 supportive environment can provide a huge amount of relief for these teens. Gender-affirming  
6 care shows kids that we want them here, and they come to know that they are wanted.

7 8. Many of my trans patients came to me because I am a trans therapist. Being a  
8 transman myself I can relate to patients in a way that others cannot.

9 9. A big part of my practice is exploring differential diagnoses. I do not lean into  
10 one diagnosis over another. Being depressed does not mean you are trans. We explore all aspects  
11 of the individual's mental health.

12 10. In situations where a patient decides to pursue medical gender-affirming care, I  
13 connect them to either Seattle Children's or Mary Bridge. Both of these clinics provide support  
14 to teens which include working with the teen and their parents and involve appointments with  
15 social workers, doctors, and psychologists.

16 11. Decisions to pursue gender-affirming medical care is client-informed. In therapy,  
17 we talk about how they feel emotionally about medical care and then check with the doctors,  
18 making sure medical treatment is appropriate.

19 12. In my teen patient population, I have seen patients who receive gender-affirming  
20 care go from actively suicidal to wanting to live. I have seen the overall wellbeing of patients  
21 drastically improve.

22 13. In the teen population the gender-affirming care they receive is reversible and  
23 they can choose to stop at any time. In fact, many teen patients are only receiving puberty  
24 blockers and the whole point of puberty blockers is to allow time for the child, doctor and parents  
25 to make an informed decision before starting hormone replacement therapy.  
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